## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Alliance for a Better Minnesota Federal PAC	
	C C00564013
Check if Z 24-hour report 48-hour report New report X Amends report filed	on 10 / 22 / 2014
Full Name of Payee	Date of Public Distribution/Dissemination
Dixon/Davis Media Group LLC	10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1028 33rd St NW	Amount
Ste 300	
City State Zip Code	26239.00
Washington DC 20007-3571	Transaction ID : SE.4207  Date of Disbursement or Obligation
Purpose of Expenditure Media Production Costs  Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District:
Michael McFadden Oppose	President State: MN
Calendar Year-To-Date Per Election for Office Sought  Disbut 2014	orsement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
Waterfront Strategies	10 21 2014
Mailing Address 3050 K Street NW	10 21 2014
Ste 100	Amount
City State Zip Code	459866.00
Washington DC 20007	Transaction ID : SE.4201 Date of Disbursement or Obligation
Purpose of Expenditure Media Buy  Category/ 004	M M / D D / Y Y Y Y
Media Buy  Media Buy  Type  004	
Name of Federal Candidate Support Office	Sought: House District:
Michael McFadden Oppose	President State: MN
Calendar Year-To-Date Disbu	ursement For: Primary X General
Per Election for Office Sought 0.00 2014	
(a) SUBTOTAL of Itemized Independent Expenditures	486105.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	486105.00
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
24.0	0 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	